الله المرادي								A	ppiication /	or LC	cket Num	ber	
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 09/994805												5	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			20				F	ATE	FEE	1 [RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			2 Oninus 20=		· 0		7	(\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		• /		7	(42=		OR	X84=	64,0	b 2
MULTIPLE DEPENDENT CLAIM P			RESENT					140=		1 1	+280=	<i>A</i> /	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	OTAL		OR OR		224,	00
CLAIMS AS AMENDED - PART II							•	OIAL		JON	OTHER	,	
	1-14.05		(Column 2) (Column 3)			S	MALL	ENTITY	OR	SMALL		ł	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	i.	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	. F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	· 20	Minus	** 0	20	=	>	(\$ 9=	1	OR	X\$18=	1	
AME	Independent	• 4	Minus	***	4	= /	\	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=		OR	+280=	/	
								TOTAL	-0-		TOTAL ADDIT. FEE	-0 -	•
		(Column 1)		(Colu	mn 2)	(Column 3)	AUI	DIT. FEE		•	AUDII. PEE		1
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	RR		=] [;	X\$ 9=		OR	X\$18=		
	Independent -	*	Minus	ses to		-		X42=		OR	X84=		1
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDEN	TCLAIM		┚┟	-140=		OR	+280=		
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)			ımn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [;	K\$ 9= _		OR	X\$18=		1
	independent	•	Minus	***		-		X42=	 	OR	X84=		1
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ├─		 	1	-	l l	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEF										OR OR	+280= TOTAL		1
-	'If the "Highest Nu	mber Previously Pa Imber Previously Pa Imber Previously Pa	aid For IN TH	IS SPACE	is less tha	an 3, enter "3."	~	DIT. FEE in the ap	opropriate bo	4,	ADDIT, FEE	: _	

FORM PTO-875 (Rev. 8/01)

TCU.8 0290;2001 482-124 / 58197

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